LIV - Liver Disease

LIV-ADV ADVANCE DIRECTIVE

OUTCOME: The patient/family/caregiver will understand the process of developing an advance directive and its role in maintaining a sense of control in the patient's medical care and decisions.

STANDARDS:

- 1. Explain that patients may lose the ability to make their own decisions and an advance directive will be able to express the patient's desires prior to the loss of decision-making abilities.
- 2. Review the option of Advanced Directives/Living Will with the patient and the patient's family. Explain treatment options and answer questions in a manner the patient/family will understand.
- 3. Refer to appropriate services to assist the patient in making a living will, e.g., Social Services, Clergy, Lawyer.
- 4. Refer to ADV.

LIV-AP ANATOMY AND PHYSIOLOGY

OUTCOME: The Patient/Family will have a basic understanding of where the liver is located in the body and its function.

STANDARDS:

- 1. Explain that the liver is the largest organ in the abdominal cavity. It is a vital organ responsible for storing, converting, and synthesizing essential nutrients in conjunction to detoxifying drugs and producing clotting factors.
- 2. Explain that life style practices such as alcohol/substance abuse or exposure to certain toxic materials or viral infections can damage the liver.
- 3. Explain that the liver has some capacity to regenerate or repair. This ability is inhibited or eliminated by continuous exposure to toxic substances such as alcohol, drugs, infections and other unknown factors.
- 4. Explain that alcohol and many other foreign substances must be detoxified by the liver in order for the substance to be eliminated from the body.

LIV-C COMPLICATIONS

OUTCOME: The patient/family will understand the complications of untreated or progressive liver disease (discuss standards that apply to patient's disease process).

STANDARDS:

- 1. Explain that Ascites, defined as a pathological fluid in the peritoneal cavity, is often seen in patients with hepatic cirrhosis. Review current findings regarding prognosis for patients with Ascites may be poor if not properly managed.
- 2. Explain that jaundice is a build up of bile acids and bilirubin. It is a yellowish discoloration of the skin, mucus membranes, and some body fluids maybe a sign of a cirrhotic liver.
- 3. Explain that end stage liver disease may have as a complication intense uncontrollable pruritis.
- 4. Explain that a common complication of liver disease is esophageal varices. Rupture of one of these varices is a life-threatening complication of liver disease.
- 5. Discuss that liver disease has a profound impact on clotting factors and may result in uncontrollable bleeding or abnormal clotting which can result in end organ damage of any part of the body.
- 6. Explain that another common end stage complication of liver disease is encephalopathy which may lead to a comatose state and death.
- 7. Explain that obesity can contribute to a fatty liver.

LIV-CUL CULTURAL/SPIRITUAL ASPECTS OF HEALTH

OUTCOME: The patient/family will understand the impact and influences cultural and spiritual traditions, practices, and beliefs have on health and wellness.

STANDARDS:

- 1. Explain that the outcome of disease processes may be influenced by choices related to health and lifestyles, e.g., diet, exercise, sleep, stress management, hygiene, full participation in the medical plan.
- 2. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness.
- 3. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are interactions with prescribed treatment.
- 4. Explain that the medical treatment plan must be followed as prescribed to be effective and that some medications/treatments take time to demonstrate effectiveness.
- 5. Discuss that traditions, such as sweat lodges, may affect some conditions in detrimental ways. Healing customs or using a traditional healer may have a positive effect on the patient's condition.
- 6. Refer to clergy services, traditional healers, or other culturally appropriate resources.

LIV-DP DISEASE PROCESS

OUTCOME: The patient/family will understand the specific liver disease. (Discuss the standards that pertain to this patient's liver disease.)

STANDARDS:

- 1. Explain that cirrhosis is caused by chronic degeneration of the parenchymal liver cells and thickening of the surrounding tissue.
- 2. Explain that alcohol and some drugs alter both the activation and degradation of key nutrients thereby compromising the overall function of the body.
- 3. Explain that cryptogenic cirrhosis is caused by unknown etiology.
- 4. Explain that certain viral infections such as hepatitis may result in destruction of liver cells, cirrhosis or hepatic cancer.
- 5. Explain that medications and over-the-counter medications and supplements can cause liver damage or liver failure. Larger than recommended dosages of acetaminophen (Tylenol®) can result in irreversible liver damage and death. This effect may be amplified by concurrent use of alcohol.

LIV-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up in the treatment of liver disease.

STANDARDS:

- 1. Discuss the patient's responsibility in the management of the disease process.
- 2. Discuss the importance of limiting substances that are toxic to the liver.
- 3. Emphasize the importance of following the treatment plan even if the patient is asymptotic.
- 4. Discuss the procedure for obtaining follow-up appointments.
- 5. Emphasize the importance of keeping follow up appointments.

LIV-L LITERATURE

OUTCOME: The patient/family will receive literature about liver disease.

STANDARDS:

- 1. Provide the parent/family with literature on liver disease.
- 2. Discuss the content of the literature.

LIV-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient/family will collaborate to make the lifestyle adaptations necessary to minimize complications and improve overall health.

STANDARDS:

- 1. Review lifestyle/changes that the patient can control such as diet, exercise, medication regimen, safety and injury prevention, avoidance of high risk behaviors and full participation with the treatment plan.
- 2. Emphasis the importance of the patient's adaptation to a healthier and lower risk lifestyle in order to minimize the complications of liver disease.
- 3. Review the community resources available to assist the patient in making lifestyle changes and make referrals as needed.

LIV-M MEDICATIONS

OUTCOME: The patient/family will understand the purpose, proper use, and expected outcomes of prescribed drug therapy.

STANDARDS:

- 1. Describe the name, strength, purpose, dosing directions, and storage of the medication.
- 2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
- 3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
- 4. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements. Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

LIV-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient and family will understand the specific nutritional intervention(s) needed for treatment or management of liver disease.

STANDARDS:

- 1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.

- d. Evaluation of the patient's nutritional care outcomes.
- e. Reassessment as needed.
- 2. Review the basic nutrition recommendations for the treatment plan.
- 3. Discuss the benefits of nutrition and exercise to health and well-being.
- 4. Assist the patient/family in developing an appropriate nutrition care plan.
- 5. Refer to other providers or community resources as needed.

LIV-N NUTRITION

OUTCOME: The patient/family will understand the diet regimen pertaining to liver disease.

STANDARDS:

- 1. Explain that the appropriate dietary regimen is one of the essential components in the management of liver disease, such as reducing sodium aids with diuresis.
- 2. Explain that fluid restrictions may be necessary to reduce fluid retention due to portal hypertension. Large meals increase portal pressure. Encourage smaller meals more frequently.
- 3. Explain that milk and eggs produce less ammonia that meats as appropriate.
- 4. Explain that herbs and supplements should not be used without discussing with the physician.
- 5. Explain that the patient should meet regularly with a Registered Dietitian for ongoing medical nutrition therapy.

LIV-TE TESTS

OUTCOME: The patient/family will understand the test(s) to be performed, including indications and impact on further care.

STANDARDS:

- 1. Explain the test ordered and collection method.
- 2. Explain the necessity, benefits and risks of the test to be performed, as applicable, including possible complications that may result from not having the test performed.
- 3. Explain how the test relates to the course of treatment.
- 4. Explain any necessary preparation and instructions for the test.
- 5. Explain the meaning of the test results, as appropriate.

LIV-TX TREATMENT

OUTCOME: The patient/family will understand the possible treatments that may be available based on the specific disease process, test results, and individual preferences.

STANDARDS:

- 1. Explain that the treatment plan will be made by the patient and medical team after reviewing available options. Discuss the risks and benefits of treatment as well as the possible consequences of refusing treatment.
- 2. Discuss the treatment plan including lifestyle adaptations, pharmacologic, surgical, and psychosocial aspects of the treatment plan.
- 3. Discuss the importance of adhering to the treatment plan, emphasizing the importance of full participation even if the patient is asymptomatic.
- 4. Emphasize the importance of keeping scheduled follow-up appointments.
- 1. Refer to community resources as appropriate.